

**Moultonborough Planning Board**  
**P.O. Box 139**  
**Moultonborough, NH 03254**  
**(603) 476-2347**

Date filed \_\_\_\_\_

\_\_\_\_\_  
(signed – PB)

## **EXCAVATION PERMIT APPLICATION FORM**

A completed application and all additional information as required by the Earth Excavation Regulations of the Town of Moultonborough must be submitted to the Planning Board at least three (3) weeks before the Public Hearing is scheduled.

A copy of the application must also be submitted to the Moultonborough Conservation Commission by the applicant.

PROPERTY LOCATION: TAX MAP: \_\_\_\_\_ LOT NUMBER \_\_\_\_\_

1. NAME(S) OF OWNERS OF PROPERTY:

\_\_\_\_\_  
\_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

2. NAME(S) OF APPLICANT:

\_\_\_\_\_  
\_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

3. DESCRIPITON AND LOCATION OF PROPOSED EXCAVATION:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. The names and addresses of all abutters of any boundary of the property being considered for excavation. Said names and addresses shall be those indicated in Town records not more than five (5) days before the day of filing.

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5. Time table of excavation project with approximate termination date:

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6. Site Excavation and Restoration Plans are attached for approval which provides the following information:

a. Site Excavation Plan

Date North arrow and locus map  
Property lines and their dimensions and bearings  
Existing topography  
Tax Map and parcel number  
Limits of Excavation  
Excavation depths  
Parcel size and total area of excavation in acres  
Access road(s) and intersections with town or state highways  
Existing or proposed visual barriers  
Distance from excavation limits to abutter's property lines  
Seasonal high water table elevations  
Erosion and sedimentation control plan  
Existing or proposed easements  
Limits of aquifer areas and surface water bodies and streams

b. Site Restoration Plan

Restored topography and drainage  
Specifications of soil fertilization, seeding, and mulching  
Plant materials – quantities and sizes  
Phasing of restoration plan (areas and dated)  
Cross-section or section showing restored topography configuration  
Erosion and sediment control plan

7. A permit application filing fee of one hundred dollars (\$100.00) Payable to the Town of Moultonborough, plus abutter's notification fee of two dollars (\$2.00) per abutter shall accompany this completed application along with certified mail – return receipt requested forms and appropriate stamps for each abutter.

To the best of my knowledge, the information accompanying this request for Earth Excavation Approval is true and correct. I understand that any approval based on incorrect information or data may be withdrawn for review and a rehearing required.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Moultonborough Planning Board**  
**P.O. Box 139**  
**Moultonborough, New Hampshire 03254**

**Authority for Inspection or Examination of Land**

The undersigned hereby authorizes the Town of Moultonborough's Planning Board, its members, officers, agents, employees, advisors or other in their company, to enter upon the property of \_\_\_\_\_ Tax Map \_\_\_\_ Lot # \_\_\_\_\_.

This property is the subject of an application presently pending before the Planning Board. The purpose of the inspection is to conduct an examination or gather information in connection with said application.

The source of my authority to allow access to this property is:

Sole Owner: \_\_\_\_\_

Co-Owner: \_\_\_\_\_

Other (Explain): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand and agree that such inspection or examination may take place on more than one occasion, and may be conducted by more than one person.

Notice(s) regarding this inspection may be given to me by regular mail at the following address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

## Abutters List

Name of Applicant: \_\_\_\_\_

Property Concerned: Tax Map \_\_\_\_\_

Lot Number \_\_\_\_\_

**All abutters must be notified of the scheduled hearing by certified mail / return receipt. Said notices to be mailed by the Planning Board at the expense of the applicant not less than ten (10) days prior to the scheduled hearing.**

### Definition of "Abutter" (RSA 672:3)

"Abutter" means any person whose property is located in New Hampshire and adjoins or is directly across the street or stream from the land under consideration by the local land use board. For purposes of receiving testimony only, and not for purposes of notification, the term "abutter" shall include any person who is able to demonstrate that his land will be directly affected by the proposal under consideration. For purposes of receipt of notification by a municipality of a local land use board hearing, in the case of an abutting property being under a condominium or other collective form of ownership, the term abutter means the officers of the collective or association, as defined in RSA 356-B:3, XXIII. For purposes of receipt of notification by a municipality of a local land use board hearing, in the case of an abutting property being under a manufactured housing park form of ownership as defined in RSA 205-A:1, II, the term "abutter" includes the manufactured housing park owner and the tenants who own manufactured housing which adjoins or is directly across the street or stream from the land under consideration by the local land use board.

The following area abutters to the property: (Attach additional sheets with page numbers as needed.)

1. **OWNER/APPLICANT** Tax Map \_\_\_\_\_ Lot Number \_\_\_\_\_

Name: \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

2. **AGENT(S)**

Name: \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

3. Tax Map \_\_\_\_\_ Lot Number \_\_\_\_\_

Name: \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Abutters list continued

4. Tax Map \_\_\_\_\_ Lot Number \_\_\_\_\_  
Name: \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_
5. Tax Map \_\_\_\_\_ Lot Number \_\_\_\_\_  
Name: \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_
6. Tax Map \_\_\_\_\_ Lot Number \_\_\_\_\_  
Name: \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_
7. Tax Map \_\_\_\_\_ Lot Number \_\_\_\_\_  
Name: \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_
8. Tax Map \_\_\_\_\_ Lot Number \_\_\_\_\_  
Name: \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_
9. Tax Map \_\_\_\_\_ Lot Number \_\_\_\_\_  
Name: \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

**Moultonborough Planning Board  
P.O. Box 139  
Moultonborough, NH 03254  
(603) 476-2347**

-DATE-

**Certified Mail - Return Receipt Requested**

Dear Abutter,

The Moultonborough Planning Board will hold a ***Submission Hearing*** on \_\_\_\_\_ on a proposed \_\_\_\_\_ for \_\_\_\_\_ located on \_\_\_\_\_, Tax Map \_\_\_\_\_ Lot \_\_\_\_\_. This ***Submission Hearing*** will be the \_\_\_\_\_ hearing scheduled at this meeting which begins at 7:00 P.M.

A Public Hearing possibly could be scheduled to immediately follow the ***Submission Hearing*** if the application is accepted as complete for Board action.

This hearing will be held at the Moultonborough Town Offices. You are an abutter to this land and if you wish to be heard, please either attend the hearing or send a letter or representative.

For further information you may call the Office of Development Services Monday - Thursday 7:30 AM - Noon & 12:30 PM - 4:00 PM, Friday 7:30 AM – 11:30 AM. The telephone number is (603) 476-2347.

Yours truly,

**Bonnie L. Whitney  
Administrative Assistant**

\*If the ***New Submission*** is not accepted as complete, the Applicant is responsible for the re-notification of Abutters.

## **Certified Mail Procedure**

1. Address and apply appropriate fee for certified mail on one business size envelope for each abutter, with return address as:  
  
Moultonborough Planning Board  
P.O. Box 139  
Moultonborough, NH 03254.
2. Fill out one abutter letter as shown in application package.
3. Fill out "Receipt for Certified Mail" as shown.
4. Fill out the Return Receipt Post Card as shown.
5. Place "Receipt for Certified Mail" and Return Receipt Post Card for each abutter under flap of envelope and submit to the Land Use Office with your application and check for fees.

### **Do Not Stuff or Seal Envelopes**

Apply proper postage for current US Postal rates for First Class Mail, Certified Mail Fee and Return Receipt Fee.



## **Certified Return**

1. Abutter's Name and Address
2. Record Article Number  
(Transfer sticker number from top portion of certified mail receipt)
3. Service Type: Check box for Certified Mail
4. Address front of card "Sender" with the following address:

Moultonborough Planning Board  
P.O. Box 139  
Moultonborough, NH 03254

# **Moultonborough Planning Board And Zoning Board of Adjustment**

## **Office Hours**

Monday through Thursday	7:30 A.M. To 12:00 P.M. 12:30 P.M. To 4:00 P.M.
Friday	7:30 A.M. To 11:30 A.M.

## **Meetings**

### **Zoning Board**

First and Third Wednesday of Each Month  
7:00 P.M. At The Moultonborough Town Offices,  
Unless Otherwise Specified

### **Planning Board**

Second and Fourth Wednesday of Each Month  
7:00 P.M. At The Moultonborough Town Offices,  
Unless Otherwise Specified



**Town of Moultonborough  
Office of Development Services Fee Schedule**

**Planning Board Fees**  
(Effective August 1, 2010)

**Major Subdivision (3 or more lots)**  
**\$300 + \$100 per newly created lot**

**Minor Subdivision (2 lots w/no further subdivision)**  
**\$275**

**Site Plan Review**  
**\$250**

**Boundary Line Adjustment**  
**\$200**

**Voluntary Merger**  
**\$0**

**Special or Conditional Use Permit (fee waived if part of concurrent application)**  
**\$100**

**Plat Registration**

*Applicants are responsible for all recording fees.*

All Plats, Notices of Decision and Planning Board required documents are required to be recorded by the applicant at the Carroll County Registry of Deeds. Copies of all recorded documents shall be submitted back to the Town after recording at applicant's expense.

**Zoning Board Fees**  
(Revised May 12, 2008)

**Application & Hearing Fees**

**Variance**  
**\$100**

**Special Exception**  
**\$100**

**Equitable Waiver of Dimensional Requirements**  
**\$100**

**Re-Hearing**

**\$100** - Hearing Fee

**Appeal of Administrative Decision Fees**

**\$200** - Application Fee (Non-Refundable)

**\$200** - Hearing Fee

**\$200** - Re-Hearing Fee (If Granted by ZBA)

**Plat Registration**

*Applicants are responsible for all recording fees.*

All Zoning Board required documents are required to be recorded by the applicant at the Carroll County Registry of Deeds. Copies of all recorded documents shall be submitted back to the Town after recording at applicant's expense.

**Abutters Notices for all Planning & Zoning Applications**

\$2 per Abutter + postage, certified mail, return receipt requested.

**Advertisement Fee for all Planning & Zoning Applications**  
**\$75**

**Hard Copies**  
**\$0.50 per page.**

**Electronic Document Transmittal**  
**\$5.00 per transmitted document**